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## In Practice Article – managing moral distress in practice

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### Abstract

Moral distress, a type of distress resulting from engaging in, or failing to prevent, decisions and actions which conflict with one’s personal values and beliefs, occurs commonly in veterinary practice. This article describes moral distress, reviews its incidence in healthcare professions and the veterinary profession in particular, explores the potential impacts on veterinarians, and discusses strategies for coping with and preventing moral distress.

### What is moral distress?

Moral distress has been defined as ‘The experience of psychological distress that results from engaging in, or failing to prevent, decisions or behaviours that transgress, or come to transgress, personally held moral or ethical beliefs’ (Crane et al., 2013). Moral distress is a distinct type of occupational stress, which is an adverse reaction employees experience in response to pressures of the workplace (Dawson and Thompson, 2017). It differs from, for example, overwork, troubled professional relationships or the uncomplicated distress of tending to a suffering animal, by the inclusion of a conflict with one’s values. Not everyone involved in tough ethical situations will experience moral distress, even when the eventual outcome goes against their own values. For some though, the experience will result in the substantial negative moral emotion which characterises moral distress. For some it might even be mental anguish.

The ethicist Bernard Rollin identifies many circumstances in veterinary or animal care work that may give rise to moral stress, in particular euthanasing healthy or treatable animals:

“...this kind of stress grows out of the radical conflict between one’s reasons for entering the field of animal work, and what one in fact ends up doing... imagine the psychological impact of constant demands to kill healthy animals for appalling reasons: ‘the dog is too old to run with me anymore; we have redecorated, and the dog no longer matches the colour scheme; it is cheaper to get another dog when I return from vacation than to pay the fees for a boarding kennel’, and, most perniciously, ‘I do not wish to spend the money on the procedure you recommend to treat the animal’ or ‘it is cheaper to get another dog’.” (Rollin, 2011).

Veterinary surgeons frequently encounter difficult ethical situations, with one study reporting more than 90% of UK veterinary surgeons surveyed faced one or more ethical dilemmas a week (Batchelor and McKeegan, 2012). Several studies have found that euthanasia (killing) of healthy and sick animals, dealing with clients with financial limitations and being asked to continue treatment when you believe euthanasia is indicated are all stressful situations (Batchelor and McKeegan, 2012, Crane et al., 2015, Hartnack et al., 2016). What makes a stressful situation give rise to moral distress is not clear, but social support and institutional

structures are likely to play a part. Individual personality differences may combine with environmental factors to give rise to distress. Just as the trait ‘neuroticism’ was positively correlated with general occupational stress in veterinarians (Dawson and Thompson, 2017) the trait ‘perfectionism’ was found to enhance vulnerability to moral distress in response to morally challenging ‘trigger’ events (Crane et al., 2015).

The notion of moral distress has been increasingly researched within human medicine, with a recent review finding most of the 239 studies focussed on nurses (69%) rather than other healthcare professionals, and were most commonly referring to critical care settings (35%) (Lamiani et al., 2017). Systematic reviews have found that the elements correlated with greater moral distress included: poor ethical climate (e.g. poor support between colleagues, lack of involvement in decision-making), poor nurse-physician collaboration, poor job satisfaction and engagement, and low levels of psychological empowerment and autonomy (Lamiani et al., 2017). In paediatric intensive care units the ‘overly ‘burdensome’ and disproportionate use of technology perceived not to be in a patient’s best interest, and powerlessness to act’ were important factors giving rise to moral distress (Prentice et al., 2016).

### **What is the impact of moral distress on veterinarians?**

Moral distress is, by nature, stressful. A recent study of veterinarians presented with clients who cannot afford to pay for treatment in full found that a veterinarian’s responsibilities – to clients, animals, colleagues, the practice and the wider profession – often clashed, leaving the veterinarian with a dilemma: whether to compromise treatment, refuse treatment, or bend the rules to assist the animal and client. As the authors state, “the moral stakes are high when making decisions about how to handle financially limited clients” (Kondrup et al., 2016).

This was not unusual. Danish companion animal veterinarians encountered financially limited clients regularly – 33.8 per cent did so 3-4 times per month, 24.6 per cent 5-10 times per month. How they dealt with each case was highly contextualised, suggesting that decision making in these situations was complex (Kondrup et al., 2016). Only around 9 per cent worked in a practice with a written policy on dealing with financially limited clients.

In one study, veterinarians rated three ethical scenarios as “highly stressful”: convenience euthanasia of a healthy animal, financial limitations of clients restricting treatment options, and a client pressing to continue treatment in spite of compromised animal welfare (Batchelor and McKeegan, 2012). The authors found that severity of reported stress was not influenced by the number of years spent working in practice, suggesting that coping with moral distress is not effectively self-taught or improved by repeated exposure.

In a study of Australian veterinary students, 69 per cent reported experiencing moral stress in relation to treatment of animals, however most took little or no action to address concerns (Verrinder and Phillips, 2014). Reasons for not taking action are unknown/were not reported, but may be due to lack of confidence, fear about adverse impacts on assessment or concerns about reduced opportunities for practical experience.

Some scholars argue that moral distress may severely impact the well-being of veterinarians, and may be one factor contributing to the high rate of suicide in the profession (Bartram and Baldwin, 2008). For example, they suggest that veterinarians may experience “uncomfortable tension” between the desire to treat an animal and the desire to fulfil the owner’s wishes,

where these are different (Bartram and Baldwin, 2008). Stark and Dougall (2012) argue that the dissonance between personal values and ideals and the reality of “convenience euthanasia” may be a stressor which can lead ultimately to the suicide of veterinarians.

The association is unproven, but we know that ethical decision-making and scenarios that give rise to this can be stressful. Given the frequency with which ethical decision-making is required in practice, it makes sense that veterinarians and associated professions should develop skills in ethical reasoning to equip them to cope with ethical conflict.

As professionals, veterinarians must adhere to a code of professional conduct (for example the RCVS Code of Professional Conduct for Veterinary Surgeons (Royal College of Veterinary Surgeons, 2017)) in addition to their personal values. However as employees, on occasion they may be asked to perform tasks they feel are not aligned with the code of conduct (for example, prescribing a particular medication because a practice has an exclusive deal with the manufacturer, rather than because this is the best medication for the animal or owner in the situation). When answering to the veterinary board, it is not an acceptable excuse to state that a decision was made because of practice policy or a directive from one’s employer. Nonetheless, employer requests are a common cause of moral distress, as employee veterinarians may be concerned about losing a future income stream if they challenge an employer.

In another study, some veterinary professionals equated being a commercial organisation with being unethical, raising the concern that working for such an organisation may be a source of moral distress for some individuals. According to the authors, this may be due to persons entering the profession having a distorted view of the contemporary industry and a professional identity that is incompatible with it (Page-Jones and Abbey, 2015).

Similarly, dualistic clinical education with an emphasis on “best practice” may lead to moral distress in veterinarians when “best practice” diagnostic and treatment pathways cannot be implemented in clinical situations (Armitage-Chan et al., 2016).

Moral and ethical reasoning is increasingly being taught in veterinary schools, however a joint report of the Federation of Veterinarians of Europe (FVE) and the European Association of Establishments for Veterinary Education (EAEVE) called for more uniform, comprehensive teaching of animal welfare, ethics and law across veterinary schools. The report stated that “One cannot be a good clinician without being aware of the ethical issues in decision-making in practice.” (Morton et al., 2013). A number of authors speculate that the application of principled moral reasoning will reduce moral distress in veterinarians (Verrinder et al., 2016).

### **Management and prevention of moral distress**

There are few evidence-based interventions for coping with moral distress. A review of health care literature highlights potentially useful interventions (summarised in Table 1). At least one human hospital instituted a “moral distress consult service” in which consultants met with personnel, discussed the ethical issue at hand and helped individuals strategise means to decrease moral distress (Epstein and Hamric, 2009). Such a system is likely beyond the means of most veterinary hospitals.

Table 1. Strategies for veterinarians and students seeking to lessen/deal with/address moral distress

Strategy	Comments
Recognise that moral distress is not uncommon.	It can be reassuring for veterinarians to know that moral distress is common in many professions, and also empowering: if a certain situation triggers moral distress, we may consider tackling this with legislation, policy changes or collective action.
Describe and define the situation from which moral distress arises.	This can be achieved by writing down a list of stakeholders (those impacted by a decision), potential outcomes, and sources of your own concern.
Learn and apply frameworks for ethical reasoning.	Education in ethical reasoning may improve understanding of ethical issues and help individuals cope with moral distress (Burston and Tuckett, 2012). The use of an ethical matrix (Mepham, 2008), while time-consuming, can provide a comprehensive checklist and may be particularly useful in situations that arise repeatedly.
Buy time	This may involve scheduling a recheck, making a time for a meeting when the situation is less emotionally charged, and getting support in the meantime.
Look for guidelines and seek assistance in interpretation where needed	In some cases, specific legislation, guidelines, codes or practice policy may apply to some situations which may dictate or suggest the most appropriate response. Unfortunately, this is not always the case and legislation can require interpretation. The dilemma of determining the appropriate response may be due to uncertainty arising from unclear, ambiguous or confusing guidelines and rules (Devitt et al., 2014). Development of policies may be one strategy for coping with situations that commonly give rise to moral distress (Epstein and Hamric, 2009).
Look for evidence	Is there additional information that would help in this situation? For example, if a healthy animal is presented for euthanasia because the client has “tried everything” to rehome the animal, are there additional options that the client was not aware of? If a client elects euthanasia for a treatable condition, are they aware of a range of potential treatments and relative costs? If this is an ethical issue, has this been documented by colleagues previously? For example, In Practice’s <i>Everyday Ethics</i> column discusses a range of real-life scenarios and provides peer-reviewed commentary on approaching these.
Communicate your concerns	You may communicate your concerns sensitively to a client, colleague, employer or other party. Improving communication may reduce the frequency and intensity of moral distress (Burston and Tuckett, 2012).
Seek morally sensitive, professional support	If you are concerned about making a decision, including regarding the impact of that decision on others, talking confidentially with a senior colleague, veterinary licencing board representative or

	academic (such as a student advisor) may help (Burston and Tuckett, 2012). Where there is perceived conflict between employer requests and one's personal values or the professional code of conduct, discussion with a human resources expert may be helpful. Many veterinary associations offer confidential human resources advice that members may call upon. Veterinary hospitals could also establish an in-house ethics committee to respond to and give advice on ethical issues and moral distress.
Notify colleagues/instructors in advance if you conscientiously object to a practice	If you have a moral objection to a practice – use of live animals in some types of teaching for example, or killing of an animal in a certain context – where possible, discuss this with instructors/colleagues in advance (Knight, 2014). This isn't always possible as we don't always know our values are being compromised until they are challenged, but it can be much easier to deal with if colleagues know these values and situations in which they might be challenged. A cultural shift towards an open, collegial workplace for discussing moral distress may help veterinarians and others better manage ethical issues, reducing the perceived degree of moral distress (Burston and Tuckett, 2012).
Consider more radical options	In some situations, it may be most appropriate to campaign for funding or resources to address an issue, engage in political action, or potentially be prepared to leave a job or even the profession (Burston and Tuckett, 2012).

## Getting emotional support

One of the challenges of moral distress in the professions is the obligation to respect client confidentiality. Fortunately, many professional organisations such as the British Veterinary Association, American Veterinary Medical Association and Australian Veterinary Association offer counselling or referral to counselling for members.

There are also 24-hour confidential telephone and online counselling services available, as well as veterinary specific resources such as VetLife <https://www.vetlife.org.uk/>

## Conclusion

Moral distress is common across many contexts. Like any form of distress, it can impact our ability to make sound decisions. Where possible it is best to avoid making major decisions while in a distressed state, and seek additional information and/or support. Fostering a practice culture where ethical issues and situations that give rise to moral distress can be openly discussed is important for the mental health and wellbeing of those working with animals. There is a need for evidence-based interventions to reduce moral distress in veterinary contexts.

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